

Pennsylvania Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____		(X3) DATE SURVEY COMPLETED: 07/11/2023
NAME OF PROVIDER OR SUPPLIER: COLONOSCOPY CENTER, LANSDALE, THE STATE LICENSE NUMBER: 24791501		STREET ADDRESS, CITY, STATE, ZIP CODE: 815 SUMNEYTOWN PIKE, SUITE 110 LANSDALE, PA 19446			
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S 0000	INITIAL COMMENT	S 0000			
S 331A	<p>This report is the result of a State licensure survey conducted on July 11, 2023, at the Colonoscopy Center, Lansdale. It was determined the facility was not in compliance with the requirements of the Pennsylvania Department of Health's Rules and Regulations for Ambulatory Care Facilities, Annex A, Title 28, Part IV, Subparts A and F, Chapters 551-573, November 1999.</p>	S 331A			
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE			TITLE:		(X6) DATE:

Pennsylvania Department of Health

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S 331A	Continued from page 1 553.31 (a) Administrative responsibilities A full time person in charge shall be appointed who has authority and responsibility for the operation of the ASF at all times. Qualifications, authority, responsibilities and duties of the person in charge shall be defined in a written statement adopted by the governing body. This REGULATION is not met as evidenced by:	S 331A	The Colonoscopy Center of Lansdale will correct deficiency number 331A ensuring that "a fulltime person in charge shall be appointed who has the authority and responsibility for the operations of the ASF at all times". The facility administrator reviewed the regulation requirements of ensuring that a fulltime person must be in charge and have the authority and responsibility for the operations of the center at all times. The facility administrator shall ensure compliance by documenting on the daily schedule which full time staff member is in charge and has the authority and responsibility for the operations of the center each day. The staff member shall be made aware of their responsibilities for the center on any day that the facility administrator is away from the center. This plan of correction shall be reported to the governing board at the next meeting planned for 7/18/2023 The facility administrator shall be responsible to review the daily	Completion Date: 07/18/2023 Status: APPROVED Date: 07/13/2023	

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S 331A	Continued from page 2	S 331A	<p>schedule on the first day of each work week to ensure that a fulltime person in charge is documented on the schedule and sign the bottom of the schedule as verification.</p> <p>The plan of correction with relation to changes to the daily schedule shall be immediate and completed plan of correction will be reported to the governing board on 7/18/2023.</p>		

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S 331A	<p>Continued from page 3</p> <p>Based on observation, review of facility documents, and interview with staff (EMP), it was determined the facility failed to ensure that a full-time person was in charge that had the authority and responsibility for the operation of the the Colonoscopy Center, Lansdale at all times.</p> <p>Findings include:</p> <p>Observation on July 6, 2023, at approximately 9:00 AM revealed the administrator for the Colonoscopy Center, Lansdale (EMP1), was in attendance at a survey that was conducted a tanother State licensed Ambulatory Surgery Center.</p> <p>In an interview conducted on July 6, 2023, at approximately 9:00 AM with EMP1 revealed the DON (director of nursing) of the Colonoscopy Center, Lansdale was currently acting as the administrator in their absence.</p> <p>Review on July 11, 2023, of facility document "The Colonoscopy Center Staff Schedule, Year 2023, Week:July 3rd-7th," revealed on July 6, 2023, the</p>	S 331A			

Pennsylvania Department of Health

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S 331A	Continued from page 4 DON was documented as "Off." In an interview conducted on July 11, 2023, at approximately 11:30 AM with EMP1 confirmed they were the administrator for the Colonoscopy Center, Lansdale. Further interview confirmed the DON was not working at the facility on July 6, 2023, in the capacity of the administrator, and confirmed a qualified staff member, who has authority and responsibility for the operation of the surgery center at all times, was not designated during the absence of EMP1.	S 331A			
S 331B		S 331B			

Pennsylvania Department of Health

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S 331B	Continued from page 5 553.31 (b) Administrative Responsibilities 553.31 Management and Administration of Operations Administrative Responsibilities (b) Administrative policies, procedures and controls shall be established, documented and implemented to assure the orderly and efficient management of the ASF. This REGULATION is not met as evidenced by:	S 331B	The Colonoscopy Center of Lansdale will correct deficiency number 331B related to having written administrative policy ensuring that the Colonoscopy Center, Lansdale has a full-time person appointed who has the authority and responsibility for the operations of the ASF at all times. On 7/12/2023 the Colonoscopy Center of Lansdale and the management team met and reviewed the Nursing Services – Organization and Staffing policy (policy #4001). The policy was updated to include the requirement that a fulltime person in charge shall be appointed, who has the authority and responsibility for the operation of the ASF at all times. The policy was also updated to include that this designated person in charge shall not have an assignment while in charge of the facility. The updated policy was submitted to the governing body for review and approval. The facility administrator and staff have been educated on the	Completion Date: 07/18/2023 Status: APPROVED Date: 07/13/2023	

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S 331B	Continued from page 6	S 331B	<p>updated policy and the administrator will be responsible to ensure compliance with the updated policy by documenting on the daily schedule which full time staff member is in charge and has the authority and responsibility for the operations of the center each day. The facility administrator shall review the daily schedule on the first day of each work week to ensure that a fulltime person in charge is documented on the schedule and sign the bottom of the schedule as verification.</p> <p>The plan of correction in relation to the updated policy shall be complete once the updated policy is approved by the governing board on 7/18/2023.</p>		

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S 331B	<p>Continued from page 7</p> <p>Based on review of facility documents and interview with staff (EMP), it was determined the facility failed to develop written administrative policies, to ensure the surgery center had a full time person appointed who has authority and responsibility for the operation of the ASF at all times.</p> <p>Findings include:</p> <p>Review on July 11, 2023, of facility document "Job Description: Administrative Director" revealed "... Assist in the establishment of policies and procedures, and standards for the ambulatory surgery center ..."</p> <p>A request was made on July 11, 2023, to EMP2 for a written policy to ensure the surgery center had a full time person appointed who has authority and responsibility for the operation of the ASF at all times. None provided.</p> <p>Interview on July 11, 2023, at approximately 11:30 AM with EMP2 confirmed the facility did not have a</p>	S 331B			

Pennsylvania Department of Health

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S 331B	Continued from page 8 policy regarding the appointment of full time person appointed who has authority and responsibility for the operation of the ASF at all times.	S 331B			



Certified End Page

COLONOSCOPY CENTER, LANSDALE, THE

STATE LICENSE NUMBER: 24791501

SURVEY EXIT DATE: 07/11/2023

**I Certify This Document to be a True and Correct Statement of Deficiencies and
Approved Facility Plan of Correction for the Above-Identified Facility Survey**

A handwritten signature in black ink that reads "Jeane Parisi".

Jeane Parisi
Deputy Secretary for Quality Assurance

A handwritten signature in black ink that reads "Debra L. Bogen MD".

Debra L. Bogen, MD, FAAP
Acting Secretary of Health



THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY